



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

**RECEIVED**  
By Carol Day at 7:38 am, Jul 02, 2014  
REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN <b>087959</b>	PRINTER SN <b>08C.3527.093</b>	DATE OF INSPECTION <b>07-01-2014</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>301 N. 2ND ST. ST. CHARLES</b>		TIME OF INSPECTION <b>1205</b>

**CHECKLIST:** Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)	<b>PASSED</b>
<input checked="" type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)	<b>27°C</b>
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY	<b>PASSED</b>
<input checked="" type="checkbox"/> TIME AND DATE DISPLAYING PROPERLY	<b>1215 07-01-2014</b>

**BREATH ALCOHOL ACCURACY STANDARDS**

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <b>INTOXIMETERS, INC.</b> LOT # <b>AG402703</b> EXP. DATE <b>01-27-2016</b>	
<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIMULATOR SN _____ SIMULATOR EXP DATE _____	

☒ **CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)**  
Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

<input type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input checked="" type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 • <b>.077</b>	TEST 2 • <b>.077</b>	TEST 3 • <b>.077</b>
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☒ RFI DETECTOR OPERATING **PASSED**

**INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)**

REFUSALS <b>0</b>	(0-.04) <b>0</b>	(.05-.09) <b>0</b>	(.10-.14) <b>0</b>	(.15-.19) <b>2</b>	(OVER .19) <b>0</b>
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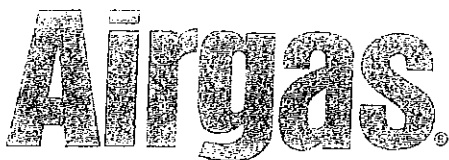
List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

**TRUEAL .078**  
**CHANGED AS IV 9VOLT BATTERY**

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME <b>DEPUTY FOURNIER, D.</b>
TYPE II PERMIT NUMBER/EXPIRATION DATE <b>240274 06-13-2016</b>	TELEPHONE NUMBER <b>636-949-0809</b>

**Return completed report to the:** Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Boulevard  
Poplar Bluff, MO 63901



Airgas USA LLC (LAB)  
3500 Bernard Street  
St. Louis, Mo. 63103  
Ph: (314) 533-3100  
Fax: (314) 533-7328

## Certificate of Analysis

Customer Name  
Intoximeters, Inc.  
2081 Craig Road  
St. Louis, Mo 63146

Test Date: 28-Jan-2014

Lot # AG402703

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
27-Jan-2016	108	Ethanol Nitrogen	0.080 ± 0.002 BrAC (218 ppm) Balance

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

<u>Serial No.</u>	<u>Concentration</u>	<u>Serial No.</u>	<u>Concentration</u>
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010595	208.9 ppm
EB0010561	103.7 ppm	EB0010562	104.9 ppm
EB0010681	52.22 ppm	EB0010579	52.94 ppm

Analytical Method: NDIR

Digitally signed by Quality Control  
Date: 2014.01.28 12:39:44 -06:00  
Reason: Dry gas standard certification of analysis  
Location: Airgas USA LLC (Lab)

Analyst: \_\_\_\_\_

*Rod Marsala*  
Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

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**PERMIT**  
**TYPE II**  
**DAVID FOURNELL**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**ALCO-SENSOR IV WITH PRINTER, INTOXILYZER 5000**

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 6/13/2014

NUMBER 240274

EXPIRES 6/13/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

**INSTRUMENT OPERATOR CARD**

*The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.*



Operator FURNELL, DAVID  
Permit No 240274  
Date Issued 6/13/2014 Date Expires 6/13/2016

AS IV Serial no: 087959  
Version no: 502B

TEST RECORD 00060

Temp Date Time 210L  
Air Blank: 07/01/14 12:16 .000  
Calibration Check: 27 07/01/14 12:16 .077

Subject Name

Subject I.D.

Operator Name, I.D.

FARNELL, D. 570  
Location ST.  
301 N. 2ND ST. CHICAGO

AS IV Serial no: 087959  
Version no: 502B

TEST RECORD 00061

Temp Date Time 210L  
Air Blank: 07/01/14 12:19 .000  
Calibration Check: 27 07/01/14 12:19 .077

Subject Name

Subject I.D.

Operator Name, I.D.

FARNELL, D. 570  
Location ST  
301 N. 2ND ST. CHICAGO

AS IV Serial no: 087959  
Version no: 502B

TEST RECORD 00062

Temp Date Time 210L  
Air Blank: 07/01/14 12:20 .000  
Calibration Check: 28 07/01/14 12:20 .077

Subject Name

Subject I.D.

Operator Name, I.D.

FARNELL, D. 570  
Location ST.  
301 N. 2ND ST. CHICAGO

AS IV Serial no: 087959  
Version no: 502B

TEST RECORD 00063

Temp Date Time 210L  
UPID: RFI 12 07/01/14 12:22

Subject Name

Subject I.D.

Operator Name, I.D.

FARNELL, D. 570  
Location ST.  
301 N. 2ND ST. CHICAGO